

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL073005</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>12/18/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>JONES FAMILY HOME #1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2437 EPHEsus CHURCH ROAD SEMORA, NC 27343</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments  The Adult Care Licensure Section conducted an annual survey on December 18, 2014.	C 000		
C 078	10A NCAC 13G .0315(a)(5) Housekeeping and Furnishings  10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; This Rule shall apply to new and existing homes.  This Rule is not met as evidenced by: TYPE B VIOLATION  Based on observation and interviews, the facility failed to be maintained in a clean and orderly manner, free of hazards as it related to live and dead bedbugs observed in 1 of 7 sampled rooms in the facility and 3 of 5 residents complaining of bedbug bites. The findings are:  Observation of Resident #1's room on 12/18/14 at 11:30 A.M. revealed: - One live bedbug crawling across resident's bed covering. - A cluster of twelve dead bedbugs were lying on the carpet at the foot of Resident #1's bed. Interview with Resident #1 on 12/18/14 at 11:30 A.M. revealed: - The "bugs" started about six months ago. - Resident #1 has been bitten 2-3 times in the last six months. - Staff spray beds. - "I still get bit sometimes by small little black	C 078		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL073005</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>12/18/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>JONES FAMILY HOME #1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2437 EPHEsus CHURCH ROAD SEMORA, NC 27343</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 078	<p>Continued From page 1</p> <p>bugs."</p> <ul style="list-style-type: none"> <li>- Staff sprayed bed day before yesterday, (Tuesday) and placed bed linen in dryer.</li> </ul> <p>Interview with Supervisor in Charge (SIC) on 12/18/14 at 11:50 A.M. revealed:</p> <ul style="list-style-type: none"> <li>- Administrator is aware of the bed bugs.</li> <li>- Administrator is going to have a professional bug person come out "I just don't know when" .</li> <li>- Staff have been spraying the furniture and the walls as well as putting the bed linens and clothes in the dryer to try and get rid of the bed bugs.</li> </ul> <p>Interview with Resident #2 on 12/18/14 at 11:55 A.M. revealed:</p> <ul style="list-style-type: none"> <li>- Staff have been spraying the house and putting clothes and linen in dryer.</li> <li>- The last time Resident #2 was bitten was a "couple of days ago" .</li> <li>- The bed bugs are not as bad as it was since they have been spraying.</li> </ul> <p>Interview with Resident #3 on 12/18/14 at 11:55 A.M. revealed:</p> <ul style="list-style-type: none"> <li>- Resident #3 saw a small bed bug on his white tee shirt yesterday, 11/17/14.</li> <li>- Before going to bed Resident #3 makes sure that he pulls the bed covers back to check for bed bugs.</li> <li>- If he sees any he brushes them unto the floor.</li> </ul> <p>Interview with SIC on 1/18/14 at 1:20 P.M. revealed:</p> <ul style="list-style-type: none"> <li>- Bed bugs have gotten better but they are hard to get rid of.</li> <li>- SIC keeps check with the residents about seeing bed bugs or getting bitten by bed bugs.</li> <li>- No resident have mentioned getting bit by bed bugs in the last couple of days.</li> </ul>	C 078		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL073005</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>12/18/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>JONES FAMILY HOME #1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2437 EPHEsus CHURCH ROAD SEMORA, NC 27343</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 078	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>- If someone complains of getting bit then we spray down their bed and put their linen in the dryer to kill any other bed bugs.</li> </ul> <p>Interview with Administrator on 12/18/14 at 3:35 P.M. revealed:</p> <ul style="list-style-type: none"> <li>- Administrator is aware of the bed bugs and has been trying for weeks via phone calls to different exterminator companies to get a professional out to facility to treat them.</li> <li>- In the meantime, facility staff have been spraying with 91% Alcohol and putting clothes and bed linen in dryer on highest heat to try and kill bed bugs per instructions from the facility's owner.</li> <li>- Facility has been washing down and putting items outside to dry.</li> <li>- Also purchased new comforters.</li> </ul> <hr/> <p>Review of facility's plan of protection dated 12/18/14 revealed:</p> <ul style="list-style-type: none"> <li>- Remove bed linens and any clothing found to have bed bugs and dry them in high heat multiple times.</li> <li>- Staff sprays 91% alcohol and Hot Shot Bed Bug Spray daily in residents' beds, furniture, closets and floors.</li> <li>- Spray all living areas and vacuum and spray all floors and drapes.</li> <li>- Administrator has contacted many professional companies for removal.</li> <li>- Staff makes sure all clothing and bed linen are dried on hot heat daily</li> <li>- Staff ask every resident every day have they seen any bugs or have any bites that need to be seen by a doctor.</li> <li>- Continue to spray daily until professional exterminator can come out.</li> </ul>	C 078		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL073005</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>12/18/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>JONES FAMILY HOME #1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2437 EPHEsus CHURCH ROAD SEMORA, NC 27343</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 078	Continued From page 3  _____ CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED FEBRUARY 1, 2015.	C 078		
C 912	G.S. 131D-21(2) Declaration of Residents' Rights  G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.  This Rule is not met as evidenced by: Based on observation and interview, the facility failed to assure every resident had the right to receive care and services which are adequate, appropriate, and in compliance with rules and regulations as related to housekeeping and furnishings. The findings are:  Based on observation and interviews, the facility failed to be maintained in a clean manner free of hazards as it related to live and dead bedbugs observed in 1 of 7 sampled rooms in the facility and 3 of 5 residents complaining of bedbug bites. [Refer to tag D078, 10A NCAC 13G .0315(a)(5) (Type B Violation).]	C 912		